



Alcohol deaths in Ireland and Northern Ireland – an aid to interpretation



Alcohol deaths in Ireland and Northern Ireland – an aid to interpretation

This document has been developed by the Institute of Public Health in Ireland on behalf of the North South Alcohol Policy Advisory Group to aid the interpretation of data on alcohol-related deaths in Northern Ireland and the Republic of Ireland. It is important to note that data are not comparable due to the differences in definitions of alcohol-related deaths as outlined in this paper.

IPH would like to acknowledge the contribution of the Health Research Board (Ireland), the Information Analysis Directorate (Department of Health, Northern Ireland) and the Vital Statistics and Administrative Research and Support Branch (Northern Ireland Statistics and Research Agency) in the development this paper.

To be cited as:

Purdy, J, McAvoy, H, Lynn, E, O'Dwyer, C, and Stewart, B. (2020) Alcohol deaths in Ireland and Northern Ireland – an aid to interpretation. Institute of Public Health.

Published June 2020

ISBN: 978-1-913829-00-1

DOI:

Table of Contents

Alcohol deaths in Northern Ireland	5
Table 1. National Statistics definition of Alcohol-Specific Deaths for Northern Ireland	5
Limitations of the new definition	6
Data accuracy	6
Alcohol deaths in Ireland	8
Alcohol-related deaths	8
Table 2. ICD codes included in generating annual Hospital In-Patient Enquiry reports on alcohol-related deaths Ireland	9

1

Alcohol deaths in Northern Ireland



Alcohol deaths in Northern Ireland

Alcohol-related deaths - Prior to 2017, Alcohol-Related Deaths in Northern Ireland were defined as ‘when the underlying (ie primary) cause of death recorded on the death certificate is most directly related due to alcohol consumption. These deaths can be identified solely through the International Classification of Diseases (ICD)’.

Alcohol-specific deaths – This term was agreed following a UK wide [consultation](#) in 2017 led by the Office for National Statistics (ONS). The new definition, ‘Alcohol-Specific Deaths’ includes conditions known to be exclusively caused by alcohol (that is, wholly attributable causes) and excludes conditions where only a proportion of the deaths are caused by alcohol (that is, partially attributable causes). Alcohol-specific deaths data are derived from cause of death recorded when a death is registered in Northern Ireland and are published annually. Mortality data are presented by cause of death, sex and geographic indicators relating to the usual residence of the deceased. The new definition includes some additional conditions not previously listed among the ICD-10 codes.

Table 1. National Statistics definition of Alcohol-Specific Deaths for Northern Ireland

ICD-10 Code	Description of condition
E24.4	Alcohol-induced pseudo-Cushing’s syndrome
F10	Mental and behavioural disorders due to alcohol
G31.2	Degeneration of nervous system due to alcohol
G62.1	Alcoholic polyneuropathy
G72.1	Alcoholic myopathy
I42.6	Alcoholic cardiomyopathy
K29.2	Alcoholic gastritis
K70	Alcoholic liver disease
K85.2	Alcohol-induced acute pancreatitis
K86.0	Alcohol induced chronic pancreatitis
Q86.0	Fetal induced alcohol syndrome (dysmorphic)
R78.0	Excess alcohol blood levels
X45	Accidental poisoning by and exposure to alcohol
X65	Intentional self-poisoning by and exposure to alcohol
Y15	Poisoning by and exposure to alcohol, undetermined intent

Reproduced from ‘[Alcohol-Specific Deaths Northern Ireland Information Paper](#)’ (NISRA, July 2019)

An [*information paper*](#) has been produced by Northern Ireland Statistics and Research Agency (NISRA) providing further detail on how alcohol-specific death statistics are collected and published. It is recommended this information is read in conjunction with this summary paper.

Limitations of the new definition

The definition of alcohol-specific deaths does not include diseases that are partially attributable to alcohol, such as cancers of the mouth, oesophagus and liver. As such, the definition of alcohol-specific deaths underestimates the total burden of alcohol consumption on mortality. Despite this, the new definition benefits from a consistent methodology across the UK, making it useful for robust comparable estimates of trends in alcohol mortality.

Data accuracy

NISRA code all causes of death mentioned on the death certificate using the ICD-10 codes. ICD coding rules are then applied to select the underlying cause of death. Deaths in Northern Ireland are generally certified by a GP and are automatically coded using coding software, but some, including alcohol-specific deaths, are referred to the Coroner. Due to extra information supplied within the Coroner's forms cause of death coding may be carried out manually. Manual coding is a potential source of error, however, risk is minimised as coding is completed by highly trained, experienced ONS staff.

2

Alcohol deaths in Ireland



Alcohol deaths in Ireland

The National Drug-Related Deaths Index (NDRDI) and the General Mortality Register (GMR) both collect data on alcohol deaths in Ireland.

Alcohol-related deaths

The **NDRDI** is a census of drug- and alcohol-related poisoning deaths (deaths due to the toxic effect of one or more substances on the body), and deaths among people who used drugs and alcohol-dependent persons in Ireland. Data from four sources are collected: the Coroner Service, the General Register Office (via the Central Statistics Office (CSO)), acute hospital records (via the Hospital In-Patient Enquiry (HIPE) system) and the national methadone treatment register (the Central Treatment List (CTL)). As it does not record all deaths that are partially attributable to alcohol, it is an underestimate of the total extent of alcohol mortality. Cases from the different data sources are cross-matched on a selection of variables, including name, gender, county of residence, date of birth and date of death, in order to avoid duplication and to ensure that information on each death is complete. An **alcohol-related death** is recorded only when:

- Alcohol is **implicated** on the death certificate **or** verdict by the coroner
- Where mentioned (in the data files) that the deceased was 'an alcoholic', 'addicted to alcohol' or 'alcohol dependent' or had 'alcohol dependence syndrome' (exact terms only)
- Where mentioned that the deceased suffered from "**Chronic** alcohol use/abuse" (exact terms only)
- Where the pathologist or other medical professional states that the deceased had an alcohol-related condition e.g. 'alcoholic liver disease', alcoholic cirrhosis, alcoholic steatosis, alcoholic fatty liver, alcoholic hepatitis, alcohol induced pancreatitis, alcoholic cardiomyopathy, liver disease due to alcohol abuse etc. Note: For any cases entered solely on the basis of 'Alcoholic Steatosis', 'Alcoholic Fatty Liver' or 'Alcoholic Ketoacidosis', particular attention to the details surrounding the event is considered, as these conditions can also be a result of 'acute' alcohol consumption.
- Where the deceased has a recorded history of treatment for alcohol use, for example:
 - Detoxification
 - detoxification drugs (e.g. Antabuse (disulfiram) or Librium (chlordiazepoxide)) It must be stated in the file that the drug was administered in relation to alcohol (including alcohol withdrawal)
 - attended Alcoholics Anonymous or was recommended to attend

The cause of death is recorded as per text on the death certificate. The cause of death is then recoded using ICD 10 coding by the NDRDI staff.

Table 2. ICD codes included in generating annual Hospital In-Patient Enquiry reports on alcohol-related deaths in Ireland

Code	Description
F10	Mental and behavioural disorders due to use of alcohol
F10.0	Mental and behavioural disorders due to use of alcohol, acute intoxication
F10.1	Mental and behavioural disorders due to use of alcohol, harmful use
F10.2	Mental and behavioural disorders due to use of alcohol, dependence syndrome
F10.3	Mental and behavioural disorders due to use of alcohol, withdrawal state
F10.4	Mental and behavioural disorders due to use of alcohol, withdrawal state with delirium
F10.5	Mental and behavioural disorders due to use of alcohol, psychotic disorder
F10.6	Mental and behavioural disorders due to use of alcohol, amnesic syndrome
F10.7	Mental and behavioural disorders due to use of alcohol, residual and late-onset psychotic disorder
F10.8	Mental and behavioural disorders due to use of alcohol, other mental and behavioural disorders
F10.9	Mental and behavioural disorders due to use of alcohol, unspecified mental and behavioural disorder
G31.2	Degeneration of nervous system due to alcohol
G62.1	Alcoholic polyneuropathy
I42.6	Alcoholic cardiomyopathy
K29.2	Alcoholic gastritis

K29.20	Alcoholic gastritis, without mention of haemorrhage
K29.21	Alcoholic gastritis, with haemorrhage
K70	Alcoholic liver disease
K70.0	Alcoholic fatty liver
K70.1	Alcoholic hepatitis
K70.2	Alcoholic fibrosis and sclerosis of liver
K70.3	Alcoholic cirrhosis of liver
K70.4	Alcoholic hepatic failure
K70.9	Alcoholic liver disease, unspecified
K86.0	Alcohol-induced chronic pancreatitis
P04.3	Fetus and newborn affected by maternal use of alcohol
Q86.0	Fetal alcohol syndrome (dysmorphic)
T51	Toxic effect of alcohol
T51.0	Ethanol
T51.1	Methanol
T51.2	2-Propanol
T51.3	Fusel oil

T51.8	Other alcohols
T51.9	Alcohol, unspecified
X45	Accidental poisoning by and exposure to alcohol
X65	Intentional self-poisoning by and exposure to alcohol
Y15	Poisoning by and exposure to alcohol, undetermined intent





publichealth.ie

Dublin Office

700 South Circular Road
Dublin 8
DO8 NH90, Ireland
T: + 353 1 478 6300

Belfast Office

6th Floor, City Exchange
11-13 Gloucester Street
Belfast
BT1 4LS, Northern Ireland
T: + 44 28 90 648494

info@publichealth.ie

[publichealth.ie](https://twitter.com/publichealth.ie)